

City of Casa Grande Youth Commission

Application for Appointment

Name: _____ Male: _____ Female: _____
Address: _____ Date of Birth: _____
City: _____ Arizona Zip: _____
Home Phone: _____ Cell Phone: _____
Email: _____
School you are attending: _____ Grade: _____
Parents or Guardian Name (s) _____

How did you hear about the Youth Commission? (Please circle any that apply)

Parent	Friend	Media (which one)	_____
Mayor/Council	School	Others:	_____

Why are you interested in the Youth Commission:

What skills, interest, talents or priorities do you think you can bring to the Youth Commission?

What are the main issues you feel the youth in Casa Grande face today?

Pp.2.cont.

What volunteer, community, school, and/or work experiences have you participated in?

Are there any projects or issues you would like the Youth Commission to pursue?

Please list two references from non-family members from your community, school, church, or other local organizations who would recommend you for the Youth Commission.

Name:

Phone:

Name:

Phone:

Members will be required to attend monthly meetings, participate in committee work and activities as agreed upon as a group. By signing the membership form, you agree to all the responsibilities of serving as a Youth Commission member.

Signature

Date

For office use only:

Date Received:

Approved:

Date Interviewed:

Denied:

Misc. notes:

Revised 3/08